

# Young asthmatics are leaving emergency rooms missing critical documentation

March 25 2011

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It sounds unbelievably simple but it's true – a written action plan for asthma treatment, attached to the drug prescription, improves asthma control in children.

"Acute care visits for asthma often signal a management failure," said Dr. Francine Ducharme, of the University of Montreal's Department of Pediatrics and the Sainte-Justine University Hospital Centre. "This research shows that, even in the emergency department setting where little time is available to provide education, the provision of a written action plan significantly improved patient adherence to prescribed inhaled and oral drugs and to physicians' recommendations.

Ensuring patients adhere to their drug regimes is a major challenge for doctors. 65% of children do not use a controlling drug effectively and statistics show that the situation usually does not improve after an emergency room visit for an asthma attack. The writing of action plan offers an additional advantage – it helps emergency physicians prescribe appropriately, in accordance to national asthma guidelines. "Considering its considerable benefit at low cost, I recommend the provision of the action plan at time of discharge after an emergency visit or hospital admission and after each preventive visit, for asthma," Ducharme said.

Written action plans are available from the Government of Quebec's Institut national d'excellence en santé et en services sociaux (INESSS). They come with three special features: a structured template for the management of short-term, long-term and non-drug treatment of the

asthma, key health messages and a self-assessment asthma control tool, and a "triplicate form" format that gives a copy to the patient, the pharmacist, and the doctor. "The idea is to facilitate the provision of the plan by the physician and to encourage the pharmacist in reinforcing the plan – we're bringing the prescribing doctor, the pharmacist and the patient closer together," Ducharme explained. There are two kinds of form: one specifically designed to record discharge instructions after a visit for an acute asthma flare-up, and another for recording instructions during a regular office visit for asthma.

The findings of this study apply predominantly to preschool-aged children, who comprised three-quarters of the 219 children who participated. "Whether results can be extrapolated to older children or adults in other settings, specialties, and medical conditions remains to be examined," Ducharme noted. "However, the research participants were similar to older populations with regards to poor use of daily controller medication, low action plan ownership, and few having attended [asthma](#) education."

Provided by University of Montreal

Citation: Young asthmatics are leaving emergency rooms missing critical documentation (2011, March 25) retrieved 28 April 2024 from <https://medicalxpress.com/news/2011-03-young-asthmatics-emergency-rooms-critical.html>

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